Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10 6730

| CLAIMS AS FILED - PART I (Column 1)                    |   |   |                                    |                                |                             | (Column 2) SMALL ENTITY TYPE TYPE      |                 | YTITY           | OŘ                     | OTHER THAN SMALL ENTITY |                     |                            |  |
|--|---|---|------------------------------------|--------------------------------|-----------------------------|--|-----------------|-----------------|------------------------|-------------------------|---------------------|----------------------------|--|
| TOTAL CLAIMS   |   |   | 9                                  |                                |                             |  | RA              | ΓE              | FEE                    | ]                       | RATE                | FEE                        |  |
| FOR  |   |   | NUMBER FILED                       |                                | NUMBER EXTRA                |  | BASIC           | FEE             | 375.00                 | OR                      | BASIC FEE           | 750.00                     |  |
| TOTAL CHARGEABLE CLAIMS                                |   |   | Ci minus 20=                       |                                | * 0                         |  | X\$             | 9=              |                        | OR                      | X\$18=              |                            |  |
| IND  | EPENDENT CL   | AIMS  | l mi                               | nus 3 =                        | D                           |  | X4:             | 2=              |                        | OR                      | X84=                |                            |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                       |   |   |                                    |                                |                             |  | +14             | 0=              |                        | OR                      | +280=               |                            |  |
| * If the difference in column 1 is less than zero, ent |   |   |                                    |                                | "0" in o                    | column 2                               | TOT             | AL              |                        | OR                      | TOTAL               | 752                        |  |
|  |   |   |                                    |                                |                             | (Column 3)                             | SMA             | SMALL ENTITY OR |                        |                         |                     | OTHER THAN<br>SMALL ENTITY |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |                                    | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY                | PRESENT<br>EXTRA                       | RA <sup>-</sup> | E               | ADDI-<br>TIONAL<br>FEE |                         | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
|  | Total .   | *   | Minus                              | **                             |                             | =                                      | X\$             | 9=              |                        | OR                      | X\$18=              |                            |  |
|  | Independent   | *<br>NTATION OF MI  | Minus                              | ***                            | · CLAIM                     | <u> -</u>                              | X42             | :=              | V                      | OR                      | X84= ·              |                            |  |
|  | ·   | NTATION OF IM   | JETTPLE DET                        | PENDENT                        | CLANVI                      |  | +14             | 0=              |                        | OR                      | +280=               |                            |  |
|  |   |   |                                    |                                |                             |  |                 | TAL             |                        | OR                      | TOTAL<br>ADDIT. FEE | ·                          |  |
| (Column 1) (Column 2) (Column 3)                       |   |   |                                    |                                |                             |  |                 |                 |                        |                         |                     |                            |  |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |                                    | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY                | PRESENT<br>EXTRA                       | RAT             | E               | ADDI-<br>TIONAL<br>FEE |                         | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
|  | Total   | *   | Minus                              | **                             | •                           | =                                      | X\$ :           | 9=              | ·                      | OR                      | X\$18=              |                            |  |
|  | Independent   | *<br>NTATION OF MI  | Minus                              | ***                            | CLAMA                       | =                                      | X42             | !=              |                        | OR                      | X84=                |                            |  |
|  | 11110111111111  | IVIATION OF IM  | JETTI LE DEF                       | LINDLINI                       | CLAIIVI                     |  | +14             | )=              |                        | OR                      | +280=               |                            |  |
|  |   |   |                                    |                                | •                           |  | TO<br>ADDIT.    | TAL<br>FEE      |                        | OR                      | TOTAL<br>ADDIT. FEE |                            |  |
|  |   | (Column 1)  |                                    | (Colur                         |                             | (Column 3)                             |                 |                 |                        |                         |                     |                            |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |                                    | HIGH<br>NUM<br>PREVIC<br>PAID  | BER<br>DUSLY                | PRESENT<br>EXTRA                       | RAT             | Έ               | ADDI-<br>TIONAL<br>FEE |                         | RATE                | ADDI-<br>TIONAL<br>FEE     |  |
|  | Total   | * .   | Minus                              | **                             |                             | =                                      | X\$ 9           | }=              |                        | OR                      | X\$18=              |                            |  |
| AME  | Independent   | *   | Minus                              | ***                            |                             | =                                      | X42             | _               |                        | OR                      | X84=                |                            |  |
| Ľ  | FIRST PRESE   | NTATION OF MI   | JLTIPLE DEF                        | PENDENT                        | CLAIM                       |  | +140            |                 |                        |                         |                     |                            |  |
| *  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                    |                                |                             |  |                 |                 |                        | OR <sub>.</sub>         | +280=               |                            |  |
| **   | If the "Highest Nui<br>If the "Highest Nu   | mber Previously Pa<br>mber Previously Pa<br>ber Previously Pa | aid For" IN THI<br>aid For" IN THI | S SPACE i                      | s less that<br>is less that | an 20, enter "20."<br>an 3, enter "3." | ADDIT.          |                 |                        | OR                      | TOTAL<br>ADDIT. FEE |                            |  |